

PUBLIC VOUCHER FOR PURCHASES AND
SERVICES OTHER THAN PERSONAL

SAPG 3116 Copy / of 3
D. O. Vou. No. _____
Bu. Vou. No. 138

U. S. _____
(Department, bureau, or establishment)

Voucher prepared at _____
(Give place and date)

THE UNITED STATES, Dr., Payee's Account No. 627

To _____
(Payee)

PAID BY

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary) Discount Terms	QUANTITY	UNIT PRICE		AMOUNT	
				Cost	Per	Dollars	Cts.
		Fixed Fee				16,390.00	

PAYMENT:

Complete ☐
Partial ☐
Final ☐

Use continuation sheet(s) if necessary

Shipped from _____ to _____ Weight _____ Government B/L No. _____ Total 16,390.00

I certify that the above bill is correct and just and that payment has not been received.

(Sign original only)

Date 25X1A 25X1A

Per _____ Title _____
required when _____

(Payee must NOT use this space)

Differences _____

Amount verified; correct for _____
(Signature or initials) _____

Contract No. A101 Date _____ Req. No. _____ Date _____ Invoice Rec'd. _____

Pursuant to authority vested in me, I certify that this account is correct and proper for payment.

† Approved for \$ 16,390.00

By _____
Title Contracting Officer 25X1A

† _____
Title Authorized Certifying Officer 25X1A
Date _____

THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE OR SERVICES SECURED WITHOUT WRITTEN AGREEMENT IN ANY FORM

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)

APPROVED:

25X1A

Approving Officer

Paid by { Check No. _____ dated _____, 19____, for \$ _____ } on Treasurer of the United States in
Cash, \$ _____, on _____, 19____. Payee _____ favor of payee named above.

(Sign original only)

* When a voucher is signed or receipted in the name of a company or corporation, the name of the person writing the company or corporate name, as well as the capacity in which he signs, must appear. For example, "John Doe Company, per _____, Secretary." If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign on the line below "Approved for \$ _____", and over his official title.

Title _____

THE RAMO-WOOLDRIDGE CORPORATION

LOS ANGELES 45, CALIFORNIA

INTEROFFICE CORRESPONDENCE

STATINTL

To:

[REDACTED]

CC:

Accounting ✓

DATE:

November 30, 1955

STATINTL

SUBJECT PERCENT COMPLETION OF
PROJECT 5022

FROM:

[REDACTED]

As of October 31, 1955, Project 5022 was 30% complete.

STATINTL

[REDACTED]

JET
hcp

SAPC 3116/17
COPY 1 OF 3

THE RAMO-WOOLDRIDGE CORPORATION
8820 Bellanca Avenue
Los Angeles 45, California

SUBJECT APPROVAL OF FIXED FEE - Contract A-101, System 2

ATTENTION:

IN ACCORDANCE WITH Clause 4 (c) of the Contract, The Contractor presents herewith his claim for fixed fee due under the subject contract for the period 1/16/55 through 10/31/55 in the amount of \$ 16,390.00

TOTAL AUTHORIZED FEE PER CONTRACT \$60,704.00

ELAPSED TIME METHOD	OF COMPLETION METHOD	ON EXPENDITURES
Elapsed Time - Mo. <u>9½</u>	Project Engineer % of Completion <u>30%</u>	Amount of Contract Excluding Fee \$ <u>735,803.00</u>
Amt. due each Mo. \$ <u>4,496.59</u>	Total Fee Earned <u>18,211.00</u>	Total Expended To Date <u>241,324.61</u>
Total due to date \$ <u>42,717.61</u>	Less 10% H.B. <u>1,821.00</u>	Percent of Completion Based on Expenditures <u>32.8%</u>
Fee claimed to date <u>- 0 -</u>	Less payments <u>- 0 -</u>	Percent of Completion Claim based on Expenditures \$ <u>16,390.00</u>
Less 10% H.B. <u>- 0 -</u>	Percent of Completion Claim <u>16,390.00</u>	Less 10% H.B. <u>- 0 -</u>
Less payments <u>- 0 -</u>		
Elapsed Time Claim <u>42,717.61</u>		

Project Engineer Signature

STATINTL

Amount of fee claimed by Contractor for period

1/16/55 through 10/31/55 \$ 16,390.00

I certify that the fixed fee claimed is correct and just, and that it is proportionate to the progress made on the contract.

STATINTL

Director Administration and Finance

STATINTL